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The Patient Protection and Affordable Care Act (ACA) is a United States federal statute signed into law by President Barack Obama on March 23, 2010. On June 28, 2012, the United States Supreme Court upheld the constitutionality of most of the ACA. The ACA is aimed primarily at decreasing the number of uninsured and reducing health care costs by improving preventative care and managing chronic diseases. The ACA, when fully implemented, will expand the number of people with health coverage, introduce strategies for improving the quality of health care, and support plans to make communities healthier places.

lowa's current health care system is set up to focus on treating people once they become sick. Some experts describe this as sick care instead of health care. Iowa will never be able to contain health care costs until we start focusing on preventing people from getting sick in the first place, putting an emphasis on improving the choices we make that affect our risk for preventable diseases.

Chronic diseases, including heart disease, cancer, obesity and diabetes, account for seven out of every 10 deaths and affect the quality of life for tens of thousands of lowans. In 2007, chronic diseases accounted for 68% of all deaths in Iowa. The dramatic growth of chronic diseases is a huge burden to Iowa. If this problem is ignored, the cost of treating chronic conditions could overwhelm health care. The good news is 80% of chronic conditions can be prevented through improved lifestyle choices focusing on prevention.

Did you know?

The Affordable Care Act was fully implemented in 2014. Some major changes included improved preventive care, elimination of annual limits on health insurance, no discrimination due to pre-existing conditions or gender, paying physicians based on value not volume, and an easier and more affordable way to purchase health insurance.

Why is the Office of Healthcare Transformation (OHCT) important to promoting and protecting the health of **Iowans?**

- The OHCT serves as a key point-of-contact for health care reform initiatives within IDPH including:
 - o Medicaid State Innovation Model
 - Accountable Care Organizations
 - Health Insurance Marketplace
 - Patient-Centered Medical Homes/Health Homes
- The mission of the OHCT is to promote community care coordination and valuebased payments for providers; and advance the patient-centered transformation of the health care system, which will improve care and reduce cost.
- A patient-centered medical home (PCMH) is a practice that provides care that is accessible, continuous, comprehensive, family-centered, coordinated, compassionate, and culturally effective. It is a model of care that holds significant promise for better health care quality, improved involvement of patients in their own care, and reduced avoidable costs over time.
- As of 2014, tens of millions of Americans now have access to health coverage through newly established health benefit exchanges (HBE) in each State which will provide one-stop shopping and make purchasing health insurance easier and more affordable to Iowans. The OHCT's role is to ensure consumer education and outreach for the HBE.
- In 2016, Iowa will begin testing the Medicaid State Innovation Model. Through this initiative, the OHCT will focus on improving care coordination through Community Care Coalition Initiatives, and will develop a plan to improve population health with a focus on three main target areas (obesity, diabetes, and tobacco use).

are we working to achieve?

Promote healthy behaviors

► Which Iowa Public Health Goals

Prevent epidemics & the spread of disease

Strengthen the public health infrastructure

What do we do?

- The goals of the OHCT are: convening stakeholders; building relationships and partnerships; streamlining efforts; and offering assistance to Local Public Health Agencies to prepare for ACA implementation by encouraging:
 - > Improved overall health of Iowans
 - > Patient focused care & increased patient satisfaction
 - Prevention and management of chronic diseases
 - Increased access to healthcare
 - Reductions in preventable emergency department visits and hospital
 - > A strong focus on social determinants of health
- The OHCT monitors federal health care issues and disseminates the key information, opportunities, and impacts to the public and other partners.
- Iowa's Health Care Reform Act (HF 2539) has tasked IDPH with developing a plan for implementation of a statewide patient-centered medical home system and developing a state initiative for prevention and chronic care management. To do this, the OHCT coordinates the Patient-Centered Health Advisory Council.
- Through the State Innovation Model, the OHCT provides infrastructure and support to providers throughout Iowa to promote care coordination and improve population health.
- The OHCT uses innovative strategies to build and maintain partnerships with the Iowa Department of Human Services, Iowa Department of Aging, Iowa Insurance Division, and the Iowa Department of Education by regularly presenting to outside stakeholder groups on national and state health care initiatives.



How do we measure our progress?

• The number of individuals enrolled in the Iowa Health and Wellness Plan.

Data Source: Iowa Department of Human Services.

How are we doing? As of September 30, 2015, there are 140,383 members enrolled in the Iowa Health and Wellness Plan. This is 17,577 more individuals enrolled than in March 2015.

2 The percentage of Iowans under age 65 with health insurance. Data Source: Urban Institute and Kaiser Commission on Medicaid and the Uninsured estimates based on the Census Bureau's March 2015 Current Population Survey (CPS: Annual Social and Economic Supplements).

How are we doing? In 2014, 7% of lowans under age 65 did not have health insurance, compared to 12% nationally.

3 The number of Iowans who enrolled in the Health Insurance Marketplace in 2014.

 $\textbf{Data Source:} \ \underline{http://aspe.hhs.gov/health/reports/2014/MarketPlaceEnrollment/Apr2014/pdf/ia.pdf}$

How are we doing? In 2014, there were:

- 29,163 Marketplace plan selections
- 94,952 Iowa Health and Wellness plan selections
- 57% were Silver plan selections
- 84% of plans selected were with financial assistance

What can Iowans do to help?

- 1. Become more informed and knowledgeable about the Affordable Care Act initiatives that are advancing including the health insurance marketplace, State Innovation Model, medical homes/health homes, and accountable care organizations.
- 2. Actively work toward developing partnerships within your community to prepare for changes that are coming with health care transformation.
- 3. Learn more about the work of Patient-Centered Health Advisory Council by visiting http://idph.iowa.gov/ohct/advisory-council. Annual Reports and Issue Briefs developed by the Councils on a variety of topics related to the spread of medical homes in Iowa are available on the "Resources" tab.
- 4. Direct uninsured lowans to Healthcare.gov for coverage on the Health Insurance Marketplace, or to www.cms.gov for information on the Affordable Care Act.



Expenditures

State funds: K07-0863; K09-0910/0991/0993/0995/0997/0999.

Federal funds: 0153-1002.

	State Fiscal Year 2014 Actual	State Fiscal Year 2015 Actual	State Fiscal Year 2016 Estimate
State funds	\$853,955	\$943,485	\$563,585
Federal funds	\$1,640,325	\$21,254	\$45,003
Other funds*	\$0	\$885,417	\$4,155,094
Total funds	\$2,494,280	\$1,850,156	\$4,763,682
FTEs	2.01	1.90	7.40

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information

Iowa Department of Public Health $\, \diamond \,$ Division of Health Promotion & Chronic Disease Prevention $\, \diamond \,$ Office of Health Care Transformation